

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Sm	7000	7/26/99
O.I.P.E. CLASSIFIER		10	7-29-99
FORMALITY REVIEW	J	71531	8.10.99

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	02/28/00
2	✓	✓	03/17/00
3	✓	✓	03/19/00
4	✓	✓	03/19/00
5	✓	✓	03/19/00
6	✓	✓	03/19/00
7	✓	✓	03/19/00
8	✓	✓	03/19/00
9	✓	✓	03/19/00
10	✓	✓	03/19/00
11	✓	✓	03/19/00
12	✓	✓	03/19/00
13	✓	✓	03/19/00
14	✓	✓	03/19/00
15	✓	✓	03/19/00
16	✓	✓	03/19/00
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28	✓	✓	03/19/00
29	✓	✓	03/19/00
30	✓	✓	03/19/00
31	✓	✓	03/19/00
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44	✓	✓	03/19/00
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46	✓	✓	03/19/00
47	✓	✓	03/19/00
48	✓	✓	03/19/00
49	✓	✓	03/19/00
50	✓	✓	03/19/00

Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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BEST AVAILABLE CO